

SELECT COMMITTEE ON INTELLIGENCE

Mr. LOTT. Mr. President, I ask unanimous consent that the Select Committee on Intelligence be authorized to meet during the session of the Senate on Wednesday, January 29, 1997, at 2 p.m. to hold a closed hearing on intelligence matters.

The PRESIDING OFFICER. Without objection, it is so ordered.

SPECIAL COMMITTEE ON AGING

Mr. LOTT. Mr. President, I ask unanimous consent that the Special Committee on Aging be authorized to meet at 2 p.m. on Wednesday, January 29, 1997, for the purpose of a business meeting.

The PRESIDING OFFICER. Without objection, it is so ordered.

ADDITIONAL STATEMENTS

THE WOMEN'S HEALTH AND
CANCER RIGHTS ACT OF 1997

• Ms. SNOWE. Mr. President, I am pleased to join my colleague from New York, Senator D'AMATO, along with Senators FEINSTEIN and HOLLINGS, in introducing the Women's Health and Cancer Rights Act of 1997. This bill provides key protections to women facing breast cancer, and to all Americans confronting a possible diagnosis of cancer.

Breast cancer is currently one of the major public health crises facing this Nation. In 1997, 180,000 new cases of breast cancer will be diagnosed in this country, and more than 44,000 women will die from the disease. Breast cancer is the most common form of cancer and the second leading cause of cancer deaths among American women. In my home State of Maine, 900 to 1,000 women will be diagnosed with breast cancer this year.

Consider for a moment what it must be like to face a cancer diagnosis. Then imagine what a woman with breast cancer goes through when she loses a breast to this disease. A mastectomy patient may endure great pain resulting from the surgery, and has a large wound with drainage tubes which must be properly cared for. She must also face the emotional pain of losing part or all of a breast, and may struggle with her fear of cancer and what lies ahead. Then try to imagine if she is released from the hospital within hours of surgery.

That is what some health plans are doing today. Yes—some health care plans have issued guidelines requiring mastectomies to be performed on an outpatient basis. The New York Times recently reported that approximately 7 to 8 percent of all mastectomies are performed on an outpatient basis. Doctors may feel pressured by their health care plan to release patients before it is medically appropriate, as health care plans push doctors harder and harder to cut costs. Women who are released from the hospital too early following a mastectomy, lumpectomy, or

lymph node dissection do not have time to recover from the surgery in a supervised setting, or have an adequate opportunity to learn how to properly care for their wound, much less begin to deal with their emotional and physical pain. And some problems or complications from the surgery may not arise within the first hours following the surgery.

The Women's Health and Cancer Rights Act of 1997 will help ensure that women with breast cancer obtain medically appropriate care. This bill says that women who undergo a mastectomy, lumpectomy, or lymph node dissection can stay in the hospital as long as a doctor deems medically appropriate, in consultation with the patient. The bill does not mandate how long a patient should stay in the hospital, or prescribe an arbitrary time period. Instead, it encourages the highest standard of medical care by allowing a doctor to exercise his best medical judgment in determining how long a patient should remain in the hospital. The bill contains strong protections for doctors to ensure that they are not penalized by insurance companies for prescribing a given length of stay. The procedures could still be performed on an outpatient basis if deemed medically appropriate by the doctor, and agreed to by the patient.

Second, the bill requires insurance companies to cover breast reconstruction following cancer surgery, as well as reconstructive surgery to make breasts symmetrical following cancer surgery. I am extremely pleased that this provision is based on the law in my own State of Maine. Currently, insurance companies treat reconstructive surgery following breast cancer differently than other types of reconstructive surgery. In fact, a recent survey found that 43 percent of the respondents had been denied coverage for follow-up reconstructive symmetry procedures. The availability of reconstructive surgery is important not only for those women who believe it is necessary to return their lives to normal following cancer surgery, but because studies show that the fear of losing a breast is a leading reason why women do not participate in early breast cancer detection programs. If women understand that breast reconstruction is widely available, more might participate in detection programs.

Finally, this bill requires insurance companies to pay full coverage for secondary consultations whenever any cancer has been diagnosed by the patient's primary physician. It also requires a health plan to cover a second opinion even when the specialist finds the patient does not have cancer, and allows the patient to go outside an HMO for consultation by a specialist. This is designed to prevent all Americans from making inappropriate and uninformed decisions regarding medical treatment due to either a false-negative or a false-positive result.

I urge all of my colleagues to join me in supporting and securing swift pas-

sage of the Women's Health and Cancer Rights Act of 1997.●

EILEEN BUTLER, GIRL SCOUT
GOLD AWARD RECIPIENT

• Ms. MIKULSKI. Mr. President, each year an elite group of young women rise above the ranks of their peers and confront the challenge of attaining the Girl Scouts of the United States of America's highest rank in scouting, the Girl Scout Gold Award.

It is with great pleasure that I recognize and applaud a young woman from the State of Maryland who is an honored recipient of this most prestigious and time honored award. She is Eileen Butler of Ijamsville, MD, and Girl Scout Troop 1034. She has been honored with the Girl Scouts of the U.S.A. Gold Award by Penn Laurel Girl Scout Council in York, PA.

The young women given this highest achievement in Girl Scouting are to be commended on their extraordinary commitment and dedication to their families, their friends, their communities, and to the Girl Scouts of the United States of America.

The qualities of character, perseverance, and leadership which enabled them to reach this goal will also help them to meet the challenges of the future. They are our inspiration for today and our promise for tomorrow.

I am honored to ask my colleagues to join me in congratulating Eileen Butler. For her Girl Scout Gold Award project, Eileen designed and set up three new exhibits for the Fountain Rock Park, a nature center. Her project addressed the need for a better understanding of the environment and the importance of working to improve the environment around you. She is one of the best and the brightest and serves as an example of character and moral strength for us all to imitate and follow.●

CONGRATULATING RECIPIENTS OF
THE FORUM MAGAZINE'S 1997
PIONEER AWARDS

• Mr. ABRAHAM. Mr. President, this Sunday the Forum magazine will host the 7th Annual African-American Pioneer Awards in Flint, MI. I rise to pay tribute to the honorees for their great achievements and contributions to the African-American community and, indeed, to all of America.

This year the Forum magazine has assembled a truly impressive list of honorees. They are:

Mr. Darwin Davis, originally from Flint, has been named one of America's 25 most important and powerful black executives by Black Enterprise magazine. His promotion to senior vice president of The Equitable in 1987 was merely the latest in a series of impressive steps within that company. He won three national sales campaigns in 3 years, moved from agent to agency manager in 4½ years and moved from agent to agency vice president in just 9